

# Short Item:

## Reminder: Medigap Portability

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### Standard Medigap Portability:

Medigap policy holders with an existing standardized Medigap Plan B, C, D, E, F, G, K or L, or other more comprehensive coverage\* than the replacing policy may port to the following standardized plans: Medigap Plans B, C, D, E, F, G, K or L. (Source: RCW 48.66.045 [1].)

*\* “Other more comprehensive coverage” does **not** include Medicare managed care plans or Medicaid programs.*

Medigap policy holders with an existing standardized Medigap Plan A, H, I, or J may port to a replacement standardized Medigap Plan A, H, I or J. However, after December 31, 2005, Plans H, I and J may be replaced only by a new Plan H, I or J without prescription coverage. (Source: RCW 48.66.045 [2].)

### Part D Medigap Portability:

Medigap policy holders with a standardized Medigap Plan H, I or J with prescription coverage, who drop their prescription coverage in that Medigap plan in order to enroll in Medicare Part D, may port to the following standardized plans if offered by the same issuer of the Medigap Plan H, I or J: Plan A, B, C, F (including high deductible F), K or L. These policy holders have until 63 days after the effective date of the Part D coverage. (Source: RCW 48.66.055.)



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**Summary of RCW 48.66.055. Refer to the actual law for specifics. All affected clients must be notified by the plan of their portability rights.**

Who can port:	What can they port to:	When can they port:
Folks in an employment-based Medigap, which ends or stops providing supplemental benefits ([3][a])	A Medigap Plan A-F (including high-deductible F), K or L, offered by any issuer ([4][a])	During the 63 days starting either the date the policy holder receives the notice of termination (or, if no notice is received, the received date of a claim denial due to plan termination) or the date the coverage ends ([6][a])
<p>Folks in a Medicare Advantage or PACE plan where:</p> <ul style="list-style-type: none"> <li>◆ the plan's certification ends; or</li> <li>◆ the plan is no longer available in the area; or</li> <li>◆ the policy holder may no longer elect the plan because of a move or other circumstance (not including failure to pay premiums), or</li> <li>◆ the plan, organization or agent has violated a provision of the plan's contract or misrepresented the plan, or other exceptional conditions ([3][b][i])</li> </ul>		<p>Starting the date the policy holder receives the notice of termination, and ending 63 days after the date coverage is terminated ([6][b])</p> <p>If the client voluntarily disenrolls from the plan due to this notice, starting the date the client receives the notice of the impending termination ([3][b][ii] or 60 days before the effective date of disenrollment, and ending 63 days after the effective date ([6][d]).</p>

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Who can port:	What can they port to:	When can they port:
<p>Folks enrolled in:</p> <ul style="list-style-type: none"> <li>◆ A Medicare risk or cost plan (section 1876), or</li> <li>◆ A demonstration project effective before April 1, 1999, or</li> <li>◆ A health care prepayment plan (section 1833), or</li> <li>◆ A Medicare select policy</li> </ul> <p><b>And</b> whose enrollment ends because:</p> <ul style="list-style-type: none"> <li>◆ the plan's certification ends; or</li> <li>◆ the plan is no longer available in the area; or</li> <li>◆ the policy holder may no longer elect the plan because of a move or other circumstance (not including failure to pay premiums), or</li> <li>◆ the plan, organization or agent has violated a provision of the plan's contract or misrepresented the plan, or other exceptional conditions ([3][c])</li> </ul>	<p>A Medigap Plan A-F (including high-deductible F), K or L, offered by any issuer ([4][a])</p>	<p>Starting the date the policy holder receives the notice of termination, and ending 63 days after the date coverage is terminated ([6][b])</p>

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<p>Folks with a Medigap whose enrollment ends because:</p> <ul style="list-style-type: none"> <li>◆ Of insolvency of the issuer or bankruptcy of the nonissuer organization, or</li> <li>◆ Of other involuntary termination of coverage or enrollment, including the plan's violation of the policy, or material misrepresentation ([3][d])</li> </ul>	<p>A Medigap Plan A-F (including high-deductible F), K or L, offered by any issuer ([4][a])</p>	<p>Starting from the earlier of either the date the policy holder receives the notice of termination, bankruptcy or insolvency, or the date of coverage termination, and ending 63 days after the date of coverage termination ([6][c])</p> <p>If the client voluntarily disenrolls from the plan due to this notice, starting 60 days before the effective date of disenrollment, and ending 63 days after the effective date ([6][d]).</p>

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<p>Folks with a Medigap who end that enrollment to enroll, for the first time, in:</p> <ul style="list-style-type: none"> <li>◆ A Medicare Advantage plan, or</li> <li>◆ A Medicare risk or cost plan (section 1876), or</li> <li>◆ A demonstration project plan, or</li> <li>◆ Any PACE program (section 1894), or</li> <li>◆ A Medicare select policy,</li> </ul> <p><b>And</b> the policy holder ends enrollment with that new plan within the first 12 months ([3][e])</p>	<p>The same Medigap the client most recently had, if available from the same issuer. After 12/31/2005, if the most recent policy had prescription coverage, the same policy modified to remove the drug benefit, or, if the client prefers, a Plan A, B, C, F (including high deductible F), K or L with any issuer.</p> <p>If the same policy is no longer available, a Medigap Plan A-F (including high-deductible F), K or L, offered by any issuer ([4][b])</p> <p>The new policy is an initial enrollment. ([7]), unless more than two years have passed since enrollment in the first plan ([9]).</p>	<p>Starting the date the policy holder receives the notice of termination, and ending 63 days after the date coverage is terminated ([6][b])</p> <p>If the client voluntarily disenrolls from the plan due to this notice, starting 60 days before the effective date of disenrollment, and ending 63 days after the effective date ([6][d]).</p>

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<p>Folks who when turning 65 and becoming eligible for Medicare Part A (hospital benefits):</p> <ul style="list-style-type: none"> <li>◆ Enroll in a Medicare Advantage plan or a PACE plan (section 1894), and</li> <li>◆ Disenroll in the plan within 12 months after the effective date of enrollment. ([3][f])</li> </ul>	<p>Any Medigap plan offered by any issuer.</p> <p>The new policy is an initial enrollment ([8]), unless more than two years have passed since enrollment in the first plan ([9]).</p>	<p>Starting the date the policy holder receives the notice of termination, and ending 63 days after the date coverage is terminated ([6][b])</p> <p>If the client voluntarily disenrolls from the plan due to this notice, starting 60 days before the effective date of disenrollment, and ending 63 days after the effective date ([6][d]).</p>
<p>Folks enrolling in Medicare Part D during the initial enrollment, who at that time were enrolled in a Medigap Plan H, I or J with prescription coverage, and who dropped their prescription coverage in the Medigap to go to Part D. ([3][g])</p>	<p>A Medigap Plan A, B, C, F (including high deductible F), K or L offered by the same issuer of the previous Medigap. ([4][d])</p>	<p>Starting the date the client receives notice from the Medigap issuer and ending 63 days after the effective date of the Part D plan coverage. ([6][e])</p>